



VILLAGE OF BROOKFIELD

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FREEDOM OF INFORMATION ACT RECORDS REQUEST

Date: _____

NAME: _____

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I request access to the following records (describe in detail):

There is a 15 cent per page charge for black and white copies. Color copies are 25 cents per page.

- ☐ I want copies of documents.
- ☐ This request is for a Commercial Purpose. *(It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose, if requested to do so by a public body. 5 ILCS 140.3.1(c)).*

Signature: _____

Compliance date _____

Received _____